



Updates From the Field TECHNICAL NOTES

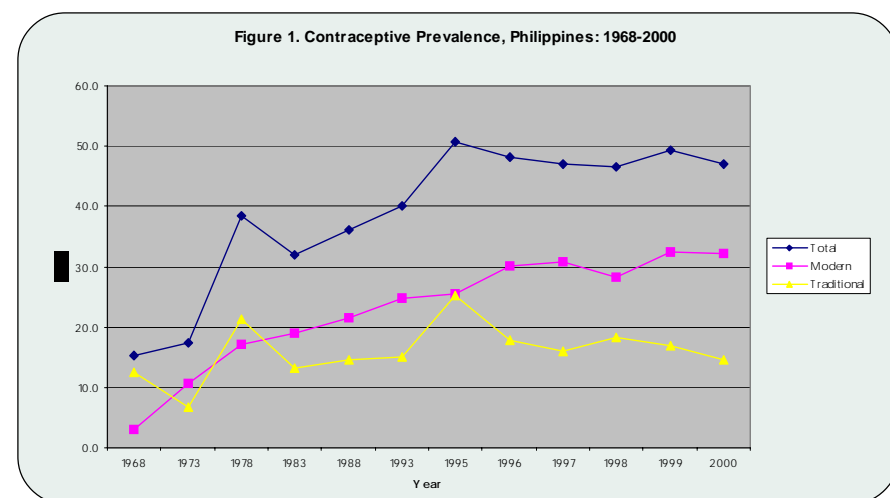
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THE 2000 FAMILY PLANNING SURVEY: VARIATION IN USE OF MODERN CONTRACEPTIVES

The 2000 Family Planning Survey is a national survey conducted by the National Statistics Office (NSO) with support from USAID. It is the fifth in a series of family planning surveys that are “riders” to the NSO’s annual Labor Force Survey. The NSO used an expanded sample in 2000, as it did in 1996, to obtain provincial family planning statistics as well as regional and national statistics. In 2000, 44,209 women 15-49 years of age were interviewed, and in 1996, 46,202 women 15-49 were interviewed. In 1995, 1997, and 1999, smaller samples were used to calculate regional and national family planning statistics, and in 1998 the NSO, with technical assistance from Macro International, conducted a National Demographic and Health Survey (NDHS) that also produced regional and national statistics. The US Bureau of the Census, with support from USAID, has provided technical assistance to the NSO in the conduct of the Family Planning Surveys and the 1998 NDHS.

Modern contraceptive use has increased almost steadily over the past 30 years, as Figure 1 shows. However, donors and health care professionals are concerned about survey results from the past few years. Modern contraceptive prevalence has not risen markedly since 1996. Table 1 shows that pills and female sterilization are the two most popular methods in the country.

Yet unmet need for family planning is almost 20%, 8.6% for spacing and 11.2%



for limiting (NDHS 1998). Use of other modern methods remains very low.

There has been a national increase in the use of pills (from 11.6% to 13.7%) and

Table 1. Percentage Distribution of Currently Married Women by Current Modern Contraceptive Method Used, by Region

Region	Pill	IUD	Injection	Condom	Female Sterilization	Male Sterilization	Mucus/Billings/Ovulation	LAM
Philippines	13.7	3.3	2.5	1.3	10.6	0.2	----	0.5
National Capital Region	13.6	2.1	1.2	1.5	14.5	0.2	----	0.6
Cordillera Administrative Region	8.7	1.2	5.4	4.3	13.4	0.1	0.1	0.7
Ilocos	12.3	1.0	3.9	0.7	13.3	----	----	0.3
Cagayan Valley	24.2	3.7	5.3	0.3	14.9	0.4	----	0.9
Central Luzon	14.1	0.9	1.9	1.5	18.0	0.3	----	0.5
Southern Tagalog	13.6	2.6	3.2	1.4	11.9	0.2	----	0.8
Bicol	8.8	1.2	1.7	1.0	5.8	----	----	----
Western Visayas	15.2	3.0	2.8	1.2	8.2	0.2	----	0.7
Central Visayas	12.7	4.8	2.3	2.7	7.9	0.1	0.1	0.2
Eastern Visayas	8.4	1.5	1.4	0.5	7.9	0.2	----	----
Western Mindanao	19.1	6.6	2.0	0.6	3.8	0.1	0.1	0.8
Northern Mindanao	15.6	9.4	3.2	0.9	7.9	0.2	----	0.3
Southern Mindanao	16.2	7.6	2.2	1.8	8.7	0.3	0.4	0.8
Central Mindanao	15.0	6.4	4.4	0.9	6.5	----	----	0.5
Autonomous Region of Muslim Mindanao (ARMM)	4.5	0.2	0.8	0.5	1.3	----	----	0.7
CARAGA	11.6	6.8	3.3	1.7	8.2	0.1	----	0.5

Source: 2000 Family Planning Survey Final Report, National Statistics Office, Republic of the Philippines, Manila



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injections (from 1.6% to 2.5%) since 1996. Otherwise, the modern method mix has not changed much. Pills and female sterilization are the modern methods most frequently chosen in almost all 16 regions. IUD use is more popular in Mindanao (except in ARMM) than it is in Luzon, but female sterilization is less popular. Higher IUD use in some regions of Mindanao is attributable to better access at Barangay Health Stations, as well as city and municipal health centers.

Modern contraceptive prevalence varies widely by region or province. Table 2 shows that in some regions modern contraceptive use has increased since 1996. In Cagayan Valley, use of modern methods increased from 40.6 percent in 1996 to 50 percent in 2000. However, modern contraceptive use in the more depressed regions of Bicol and the

ARMM have by far the lowest modern contraceptive use, but there is also extreme variation within regions with relatively high prevalence rates.

Poor performance in some provinces is attributable to remoteness, lack of infrastructure, or politicalization of family planning. The reasons for poor performance are less clear in other provinces.

Maternal and child health (MCH) statistics as reported by the 2000 MCH Survey also reveal significant variation between regions and provinces. However, the MCH Survey results do not show quite the same patterns as the Family Planning Survey. Although childhood immunization coverage is lower than the national average in Bicol and Eastern Visayas, tetanus toxoid vaccination of mothers and vitamin A supplementation for children are not lower

vaccinations, and vitamin A supplementation are not relatively high.

The reasons are understandable. MCH services are not usually politicized, as is family planning. Vaccines for children have been in short supply throughout the country. Rumors and misconceptions associated with tetanus toxoid vaccination of pregnant women have led to lower coverage than expected, and vitamin A is primarily delivered by semi-annual national campaigns.

Women of reproductive age in depressed areas of the country use family planning services significantly less than elsewhere. But there is significant variation in modern contraceptive use between provinces in almost all regions of the country. Female sterilization is the second most popular program method,

Table 2. Current Modern Contraceptive Use among Currently Married Women, 1996 and 2000

Region	Any modern method: 1996 (%)	Any modern method: 2000 (%)	Any modern method: provincial low 2000 (%)	Any modern method: provincial high 2000 (%)
Philippines	30.2	32.3	4.6	53.0
National Capital Region	31.6	33.6	31.0	39.4
Cordillera Administrative Region	29.6	33.9	22.8	44.5
Ilocos	29.3	31.5	27.9	43.1
Cagayan Valley	40.6	50.0	28.9	53.0
Central Luzon	38.3	37.2	30.4	41.1
Southern Tagalog	31.6	33.7	17.5	43.9
Bicol	19.7	18.5	14.8	29.6
Western Visayas	27.2	31.3	22.5	35.8
Central Visayas	29.7	30.8	23.3	42.5
Eastern Visayas	20.0	19.9	13.9	34.9
Western Mindanao	27.3	33.4	14.3	36.7
Northern Mindanao	38.5	37.6	31.8	42.5
Southern Mindanao	36.1	38.1	32.7	43.0
Central Mindanao	26.8	34.1	15.3	41.0
Autonomous Region of Muslim Mindanao	6.4	8.1	4.6	12.2
CARAGA	33.8	32.2	29.0	34.8

Sources: 1996 and 2000 Family Planning Survey Final Reports, National Statistics Office, Republic of the Philippines, Manila.

Eastern Visayas has not increased since 1996, and use there remains relatively low.

The 2000 survey also reveals differences between provinces. Almost all 16 regions have provinces with modern contraceptive prevalence rates that are significantly different. Bicol, Eastern Visayas, and

than the national averages in these two regions. In Cagayan Valley, where modern contraceptive prevalence is the highest, childhood immunization, tetanus toxoid

but poor access to it leaves many women with unmet need for limiting their family size.

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